







Application for Change/Transfer of Water Right

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION IF FILED WITH THE DEPARTMENT OF ECOLOGY

| | FOR OFFICIAL USE ONLY | | | | | |
|--|-------------------------------------|--|--|--|--|--|
| (Check all that apply.) | DATE APPLICATION RECEIVED 5-17-2012 | | | | | |
| ☐ Change purpose(s) of use | | FEE \$ | | | | |
| Add purpose(s) of use | DATE ACCEPTED 5 | 17-2012 BY SC | | | | |
| ☐ Change point(s) of diversion/withdrawal | | NC 220J@7 | | | | |
| Add point(s) of diversion/withdrawal | COUNTY_Clau | | | | | |
| X Change/transfer place of use | SPECIAL AREA | | | | | |
| Other (i.e. consolidation, intertie, trust water) | | | | | | |
| | SEPA: 🗆 EXEMPT 🗆 NOT EXEMPT | | | | | |
| Explain: Change to current location of outtake and use. | ECY CODING: 001-002-WR10285-000011 | | | | | |
| **IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL | APP NO PERMIT NO | | | | | |
| SHEETS (PLEASE PRINT OR TYPE CLEARLY)** | | | | | | |
| | CERT NO. | _ CERT OF CHG NO | | | | |
| I have participated in a pre-application conference with Ecology.1. Applicant Information | | | | | | |
| APPLICANT/BUSINESS NAME | PHONE NO. | FAX NO. | | | | |
| Sequim Prairie Ditch Company | 360-683-5649 | none | | | | |
| ADDRESS | | | | | | |
| 660 N. Blake Rd | | | | | | |
| CITY | STATE | ZIP CODE | | | | |
| Sequim | Wa. | 98382 | | | | |
| EMAIL ADDRESS (IF AVAILABLE) | | | | | | |
| | | | | | | |
| CONTACT (IF DIFFERENT FROM ABOVE) | PHONE NO. | FAX NO. | | | | |
| Gary Smith | 360-683-5049 | 360-681-3948 | | | | |
| ADDRESS | 300-003-3047 | 300-081-3748 | | | | |
| 373 Schmuck Rd. | | | | | | |
| CITY | STATE | ZIP CODE | | | | |
| Sequim | Wa. | 98382 | | | | |
| EMAIL ADDRESS (IF AVAILABLE) | | | | | | |
| garsmith@nikolabroadband.com | | | | | | |
| | | | | | | |
| LEGAL LAND OWNER OF PART OWNER OF PROPOSED PLACE OF USE | PHONE NO. | FAX NO. | | | | |
| | N/A | N/A | | | | |
| ADDRESS | | | | | | |
| N/A | | | | | | |
| CITY | STATE | ZIP CODE | | | | |
| | | | | | | |
| EMAIL ADDRESS (IF AVAILABLE) | | L. L. Commission of the Commis | | | | |
| | | | | | | |

| 2. Water Right Information | | |
|--|--|---|
| WATER RIGHT OR CLAIM NUMBER | RECORDED NAME(S) | handa a a a a a a a a a a a a a a a a a a |
| 220 | Sequim Prairie Ditch Company | |
| DO YOU OWN THE RIGHT TO BE CHANGED? X YES IF NO, PROVIDE OWNER(S) NAME and ADDRESS: | NO | |
| HAS THE WATER BEEN PUT TO BENEFICIAL USE IN | THE LAST FIVE (5) YEARS? X YES \(\square\) NO | |

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

3. Point(s) of Diversion/Withdrawal: A. Existing SOURCE 1/4 TWP. RGE. PARCEL# WELL TAG# 1/4 NE NE 26 30 4 **Dungeness River B.** Proposed SOURCE 1/4 1/4 SEC. TWP. RGE. PARCEL# WELL TAG# DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL? EXISTING: YES NO PROPOSED: YES NO - IF NO, PROVIDE OWNER(S) NAME: Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment. 4. Purpose of Use: A. Existing **PURPOSE OF USE GPM or CFS** ACRE-FT/YR PERIOD OF USE Irrigation, Stock and Domestic April 15-Sept. 15 20cfs **B.** Proposed PURPOSE OF USE **GPM or CFS** ACRE-FT/YR PERIOD OF USE No Change 5. Place of Use: A. Existing LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: Those lands described in the 1924 adjudication. SEC. TWP. RGE. COUNTY PARCEL# # OF ACRES 1/4 DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES X NO IF NO, PROVIDE OWNER(S) NAME: **B.** Proposed LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED: The combined places of use of the Eureka, Independent and Sequim Prairie Irrigation Company as described in the 1924 adjudication and those described in maps provided to DOE by these Companies.

TWP.

SEC.

1/4

1/4

RGE.

COUNTY

PARCEL#

OF ACRES

| 6. Remarks and Other Re | levant I | nformation: | | | |
|---|---|---|--|--|--|
| This change is an integral part of | of the sew | MOA between DOE and the | ne Dungeness Riv | ver Agricultural Water | |
| Users Association. | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| IF FOR SEASONAL OR TEMPORARY, STAR | T DATE | // END DATE/ | / | | |
| Certain applications may incur a I of Revenue has requested notification with a copy of this request. For fur PO Box 47477, Olympia, WA 985 | tion of pot orther info | ential taxable water right rela mation, contact: Department | ted actions and th | erefore may be provided | |
| 7. Signatures: | | | | | |
| I certify that the information about to process my application, I her Board access to the above site (sapplication, I understand that all Seguim Prairie Diff. Great S. Stone Applicant Printed Name – Title | reby gran s) for insp l responsit | t staff from the Department ection and monitoring purpo | of Ecology or the oses. If assisted | he County Conservancy in preparing this above | |
| Sequim Prairie Ditch | 1 | 1. 11 | | 518/12 | |
| Water Right Holder Printed Name Water Right Holder Signature | | | (Date) | | |
| water Night Hotter I Amed Name | | Water Right Houses Signature | | (Dutc) | |
| | | | | / / | |
| Land Owner of Existing Place of Use Printed N | ame | Land Owner of Existing Place of Use | Signature | (Date) | |
| | | | | | |
| | | | | | |
| Land Owner of Proposed Place of Use Printed ! | Name | Land Owner of Proposed Place of Use | Signature | (Date) | |
| Please check the region in which the proj | ect is located | l: | | | |
| *Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611 | 15 Y | Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490 | | ☐ Eastern Regional Office 4601 N. Monroe Street Spokane, WA 99205-1295 (509) 329-3400 | |
| | 3) B | orthwest Regional Office 190 – 160 th Avenue SE ellevue, WA 98008-5452 25) 649-7000 | Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300 | | |

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

TI MAD NOT INCLUDED AT INCOMPLETE

TI ADDITION FEE NOT ENCLOSED